

Week Ending: April 1, 2017

Disease Surveillance & Risk Report

No Report No Activity Sporadic Local Regional Widespread Severe

DEFINTION of Influenza-like or Flu-Like Illness: (ILI):

1) Fever > 100°F measured with a thermometer AND (2) Cough AND/OR sore throat in the absence of a known cause other than influenza

Madison County Flu Activity

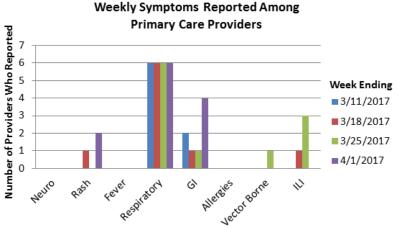
Flu Activity for the week 13, ending 4/1/17: Widespread

- <u>Lab-confirmed flu</u>: 24 laboratory confirmed flu (7 flu Type A and 17 flu Type B) were reported. The season total to date of reported flu cases is: 387.
 - 7 flu
- <u>Schools Districts*</u>: 0.8% of children seen by school nurses appeared with symptoms of influenza-like illness.
- College Health Centers*: Flu reported
- Primary Care Providers*: Flu reported
- New York State Hospital Report (HERDS): Two flurelated hospitalization reported by hospitals in Madison County for week 13. A total of 31 flu-related hospitalizations have been reported this season to date in Madison County.

Madison County Disease Surveillance Updates

Reports for the week ending 4/1/17:

- <u>Communicable Diseases Reported to the Health Department</u>: 6 Chlamydia and 1 new chronic Hepatitis C
- <u>Primary Care Providers Reported*:</u> Respiratory infections, rashes, gastrointestinal illness (GI), upper respiratory infections (URI), flu, strep throat, sore throats, coughs, colds, pink eye, sinus infections, and scabies
- <u>College Health Centers*:</u> Respiratory illness, rashes, GI, flu, strep, pink eye (conjunctivitis), coughs, colds, mono, and sinus infections
- <u>Schools Districts*:</u> Strep, flu, sore throats, colds, bronchitis, pink eye, ILI, and GI (mostly vomiting) were reported
- Hospital Weekly Surveillance*: Flu, respiratory illness, GI, URI, strep, fevers, and pneumonia
- Syndromic Surveillance in Emergency Departments 3/24/17 to 4/2/17: Mild to moderate sensitivity for asthma
- Medicaid Over-the-Counter (OTC)
 Script Medication Alerts—
 3/9/17 to 3/18/17: No alerts



^{*}Information denoted with an asterisk is subjective and provided on a voluntary basis.

^{**}Neurologic can include non-specific diagnosis of neurological infection (e.g. Meningitis, Encephalitis, etc.) or non-specific conditions (e.g. headache, numbness, dizziness, blurry/double vision, speech difficulty, confusion, disorientation, or anxiety)

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New York State Flu Activity United States Flu Activity

Flu Activity for the week ending 3/25/17 (week 12): Widespread

- <u>Lab-Confirmed Flu:</u> 2,360, a 18% *increase* over last week. Flu was reported in 59 counties.
- <u>Flu-Related Hospitalizations:</u> 390 reports, a 5% *increase* over last week.
- A select group of providers across the state (outside of NYC)
 reported the percentage of office visits due to complaints of flu-like
 illness (ILI) was 3.88; this is an increase from last week, and is
 above the regional baseline of 3.0%.
- <u>Flu-Associated Pediatric Deaths</u>: No reports this week. There have been seven flu-associated deaths this season to date.

Laboratory Reports of Influenza (including NYC) Calculated based on lab-confirmed influenza cases per 100,000 population. Incidence ranged from: 0-86.5 cases per 100,000 population. CASES BY COUNTY No cases reported this season Cases reported previously this season, but not this week 0.01-1.99 cases/100,000 population Source: New York State Department of 2-4.99 cases/100,000 population Health. Influenza Surveillance, Activity 5-9.99 cases/100,000 population and Reports, 2015-16. http://on.ny.gov/1GTxdpF

Greater than or equal to 10 cases/100,000 population

Flu Activity for the week ending 3/25/17 (week 12): Widespread

Flu activity remained elevated.

- Widespread influenza activity was reported by 31 states
- Regional influenza activity was reported by Guam, Puerto Rico and 12 states
- Local influenza activity was reported by the District of Columbia and five states
- Sporadic activity was reported by two states
- No influenza activity was reported by the U.S. Virgin Islands.

Surveillance Summary:

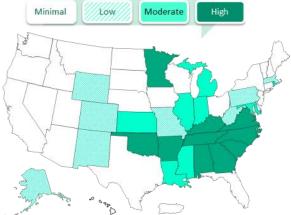
- 10 states experienced high ILI activity; Eight states experienced moderate ILI activity; Eight states experienced low ILI activity; and ... New York City, Puerto Rico, and 24 states experienced minimal ILI activity (Fig 2).
- Based on pneumonia and influenza (P&I)
 mortality data, 7.8% of deaths during week
 8 were due to P&I; this is above the
 epidemic threshold of 7.5% for week 10.
- A cumulative rate for the season of 54.1 lab-confirmed flu-associated hospitalizations per 100,000 population was reported.
- Outpatient illness visits reported through the U.S. ILI Network was 3.2%, this above the national baseline of 2.2%. Eight of 10 U.S. regions reported ILI at or above their region-specific baselines.
- Six flu-associated pediatric deaths have been reported. To date, 61 deaths have been reported for the 2016-17 flu season.

Figure 1: Geographic Spread of Influenza as assessed by State and Territorial Epidemiologists

(This figure does not measure the severity of influenza activity.)



Figure. 2: ILI Activity from ILINet Data



ILI Net Data based on percent of outpatient visits in states due to ILI, more on Fig. 2 at: http://l.usa.gov/1d3PGtv

Sources: FluView: Weekly U.S. Influenza and Surveillance Report. Centers for Disease Control and Prevention. http://l.usa.gov/leDDFhh

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